


AF/STW  
PTO/SB/21 (12-97)

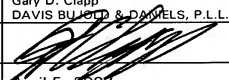
	Application Number	10/614,630
	Filing Date	July 7, 2003
	First Named Inventor	Robert Lawrence FAIR
	Group Art Unit	2113
Examiner Name		Michael C. MASKULINSKI Fax: (571) 273-8300
Total No. of Pages in this Submission: 13		Attorney Docket Number EMCCOR P08AUSD1

## ENCLOSURES (check all that apply)

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                   |                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Fee attached</li> </ul> <input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> </ul> <input type="checkbox"/> Extension of Time Request (in Duplicate) | <input type="checkbox"/> Assignment papers (for an Application)                                                   | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Express Abandonment Request                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Drawing(s)                                                                               | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Information Disclosure Statement                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Licensing-related Papers                                                                 | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) | <input type="checkbox"/> Proprietary Information                                           |
| <input type="checkbox"/> Response to Missing Part/s Incomplete Application                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> To Convert a Provisional Petition                                                        | <input type="checkbox"/> Status Letter                                                     |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address                           | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> Terminal Disclaimer                                                           | Postcard                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Small Entity Statement                                                                   |                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Request for Refund                                                                       |                                                                                            |


REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Gary D. Clapp DAVIS BUJOLD & DAWELS, P.L.L.C.	Reg. No. 29,055 CUSTOMER NO. 020210
Signature		
Date	April 5, 2007	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 5, 2007.

Type or printed name	Gary D. Clapp
Signature	

Date: April 5, 2007 (tac)